PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number 10003207 AMBON ADDIVISION					
CLAIMS AS FILED - PART (Column 1)					l (Colu		SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			7				R	ATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			7 minus 20=		· 6-		×	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ minus 3 =		0		×	42=		OR	X84=		
MU	ILTIPLE DEPEN	IDENT CLAIM P	REŚENT					40=		OB	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2		TAL		OR	TOTAL	-7/40	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							10	/IAL	L	JUN	OTHER	740 THAN	
							SN	IALL	ENTITY	OR	SMALL	8	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIĞI NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ž	Total	. 6	Minus	* 0	0	- O	X	9=	7	OR	X\$18=	0	
	Independent	. /	Minus	***	3	-0	X.	42=		OR	X84=	0	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=	/		+280=	2	
								TOTAL	/	OR	TOTAL	73	
1	-31-0	4.						T. FEE	<u>/</u>	OR .	ADDIT. FEE		
AMENDMENT B	<i>(1)</i> -1/	Claims Claims REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	KEST BER OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 6	Minus	* 2	10	- O	XS	9=		OFI	X\$18=	0	
AME	Independent	• /	Minus	***	3	-0	X4	12=		OR	X84=	0	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							40=		OR	+280=	0	
								OTAL	/	OR	TOTAL ADDIT, FEE	0	
		(Column 1)		(Colur	mn 2)	(Column 3)	AUUII	1. FEG 1	V		ADDII. FEES	<u>a</u>	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA	RA	TE.	ADDI- TIONAL FEE		RATE	ADDI: TIONAL FEE	
	Total	*	Minus	*			XS	9=		OR	X\$18=	*	
\ME	Independent	*	Minus	***		•	X4	2=			X84=	书	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							_		OR		一韦	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	₽	
**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ODDIT. FEE **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ODIT. FEE		
		nber Previously Pal					found in	the app	propriate box	in col	JMn 1.	es	